FORM 4

#### **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB	API	PRO'	VAL
-----	-----	------	-----

OMB Number:	3235-0287
Estimated average burden	
hours per response:	0.5

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

of Country (of the Invocation Company) root of the												
1. Name and Address of			2. Issuer Name <b>and</b> Ticker or Trading Symbol BALL Corp [ BLL ]		Relationship of Reporting Person(s) to Issuer (Check all applicable)							
<u>HAYES JOHN A</u>				X	Director	10% Owner						
(Last)	(First)	(Middle)		X	Officer (give title below)	Other (specify below)						
		(	3. Date of Earliest Transaction (Month/Day/Year) 04/15/2020		CHAIRMAN, PRESIDEN	T & C.E.O.						
(Street) BROOMFIELD	СО	80021-2510	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv	dual or Joint/Group Filing (Chec Form filed by One Reporting I Form filed by More than One	Person						
(City)	(State)	(Zip)			, a.a o							

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	3. Transac Code (Ir 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr.	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
		Code	v	Amount	(A) or (D)	Price	3 and 4)		(msu. 4)
Common Stock	04/15/2020	<b>M</b> <sup>(1)</sup>		38,213	A	\$17.918	555,916.1389	D	
Common Stock	04/15/2020	F <sup>(2)</sup>		22,477	D	\$67.64	533,439.1389	D	
Common Stock							9,353.176	I	401(k) Plan <sup>(3)</sup>

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Ir 8)			tive ties red (A) posed of str. 3, 4	Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Stock Appreciation Rights (sars)	\$17.9175	04/15/2020		M <sup>(4)</sup>			38,213	01/26/2012	01/26/2021	Common Stock	38,213	\$0.00	76,426	D	

### Explanation of Responses:

- 1. Common stock acquired upon the exercise of Stock Appreciation Rights (SARS).
- 2. Shares withheld for the cost of the Stock Appreciation Rights (SARS) and for payment of the tax obligation on the exercise of the Table II SARS.
- 3. Total number of 401(k) Plan shares acquired through periodic dividend reinvestment, participant's contributions and employer matching contributions.
- 4. Exercise of Stock Appreciation Rights (SARS) pursuant to reporting person's August 30, 2019, 10b5-1 Plan.

### Remarks:

/s/ Charles E. Baker attorney-infact for Mr. Hayes

04/17/2020

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.